

<i>SERFF Tracking Number:</i>	<i>CAKN-126697873</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Catholic Knights</i>	<i>State Tracking Number:</i>	<i>46086</i>
<i>Company Tracking Number:</i>	<i>16-610</i>		
<i>TOI:</i>	<i>A02I Individual Annuities- Deferred Non-Variable</i>	<i>Sub-TOI:</i>	<i>A02I.003 Single Premium</i>
<i>Product Name:</i>	<i>SPDA-5</i>		
<i>Project Name/Number:</i>	<i>CNO-16 (ss)/16-610</i>		

Filing at a Glance

Company: Catholic Knights

Product Name: SPDA-5

TOI: A02I Individual Annuities- Deferred Non-Variable

Sub-TOI: A02I.003 Single Premium

Filing Type: Form

SERFF Tr Num: CAKN-126697873 State: Arkansas

SERFF Status: Closed-Approved- Closed State Tr Num: 46086

Co Tr Num: 16-610

State Status: Approved-Closed

Reviewer(s): Linda Bird

Author: Donna Peterson

Disposition Date: 07/01/2010

Date Submitted: 06/29/2010

Disposition Status: Approved-Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: CNO-16 (ss)

Project Number: 16-610

Requested Filing Mode:

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments: Wisconsin, our state of domicile, is part of the Inter-state Compact. This product has been filed with the Compact for approval.

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 07/01/2010

Created By: Donna Peterson

Corresponding Filing Tracking Number:

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 07/01/2010

Deemer Date:

Submitted By: Donna Peterson

Filing Description:

Catholic Knights merged with Catholic Family Life Insurance April 1, 2010. A new name was chosen by our new combined board of directors the first weekend in June. Wisconsin, our state of domicile, approved the new name June 17, 2010. Last week name change filings were submitted to all other states where we are licensed. This is the only reason the name of the society is bracketed as variable.

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For the new merged society we are filing a complete new portfolio. This is not a replacement filing. We are a Fraternal Benefit Society filing a fixed Single Premium Deferred Annuity and Waiver of Surrender Charge Benefit Access Rider.

Application for Membership and Annuity form 2010 ANTY APP will be used with this annuity. The application was filed in your state on June 23, 2010

SERFF filing no: CAKN- 126676715.

The forms with this filing include:

- 1) Contract - form no. 2010 SPDA-5 AR
- 2) Rider - form no. 2010 ANTY RDR

The Rider will be made a part of every annuity at issue. It is effective on the certificate issue date and there is no expiry date or age. It is intended for use with new issues. There is no charge for this benefit rider.

The Rider will also be used with the following flexible premium annuities filed with your state:

- 1) 2010 FPDA-10 filed June 23, 2010 SERFF no. CAKN- 126676715
- 2) 2010 FPDA-6 filed June 24, 2010 SERFF no. CAKN- 126693373 - approved June 25, 2010 and
- 3) 2010 FPDA-2 filed June 25, 2010 SERFF no. CAKN-126605138

Except for the education benefit, there is no limit on the amount of account value available for the penalty-free withdrawal. We anticipate that most of the account value will be withdrawn when first qualified. However, there are no limits on the number of times an annuitant can apply for additional benefits. Once qualified the benefits apply through the surrender charge period.

Company and Contact

Filing Contact Information

Donna Peterson,	donna@cfli.org
1100 W Wells Street	414-278-6509 [Phone]
Milwaukee, WI 53233	

Filing Company Information

Catholic Knights	CoCode: 56030	State of Domicile: Wisconsin
1100 West Wells Street	Group Code:	Company Type: Fraternal
Milwaukee, WI 53233	Group Name:	State ID Number: 2796
(414) 273-6266 ext. 6468[Phone]	FEIN Number: 39-0201015	

SERFF Tracking Number: CAKN-126697873 State: Arkansas
Filing Company: Catholic Knights State Tracking Number: 46086
Company Tracking Number: 16-610
TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.003 Single Premium
Variable
Product Name: SPDA-5
Project Name/Number: CNO-16 (ss)/16-610

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation: \$50 X 2 for contract and rider
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Catholic Knights	\$100.00	06/29/2010	37637124

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<i>Product Name:</i>	<i>SPDA-5</i>		
<i>Project Name/Number:</i>	<i>CNO-16 (ss)/16-610</i>		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	07/01/2010	07/01/2010

<i>SERFF Tracking Number:</i>	<i>CAKN-126697873</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Project Name/Number:</i>	<i>CNO-16 (ss)/16-610</i>		

Disposition

Disposition Date: 07/01/2010

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>CAKN-126697873</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Product Name:</i>	<i>SPDA-5</i>		
<i>Project Name/Number:</i>	<i>CNO-16 (ss)/16-610</i>		

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document	Life & Annuity - Acturial Memo		No
Form	Single Premium Deferred Annuity		Yes
Form	Access Waiver of Surrender Charge Rider		Yes

SERFF Tracking Number: CAKN-126697873 State: Arkansas

Filing Company: Catholic Knights State Tracking Number: 46086

Company Tracking Number: 16-610

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.003 Single Premium
Variable

Product Name: SPDA-5

Project Name/Number: CNO-16 (ss)/16-610

Form Schedule

Lead Form Number: 2010 SPDA 5

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	2010 SPDA 5 AR	Policy/Contract Certificate	Single Premium Deferred Annuity	Initial		50.400	SPDA-5 AR fnl fild vrsn 6-28.pdf
	2010 ANTY RDR	Certificate Amendment, Insert Page, Endorsement or Rider	Access Waiver of Surrender Charge Rider	Initial		53.500	Access Annuity Rdr (CNO) (3).pdf



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SECTION 1 SPECIFICATIONS PAGE

ANNUITANT: [John D. Doe]
ANNUITANT GENDER: [Male]

ANNUITANT DATE OF BIRTH: [6/1/1975]
CERTIFICATE NUMBER: [1234567]

CERTIFICATE DATE: [7/1/2010]

(The Certificate Date is the Effective Date for tax qualified plan provisions. The Owner shall comply with the tax qualified plan provisions to prevent loss of the advantages of tax deferral and to prevent tax penalties.)

INITIAL MATURITY DATE: [7/1/2065]
OWNER: [John D. Doe]

SINGLE PREMIUM: [\$50,000]

INITIAL FIXED INTEREST RATE: [3.00%]

INITIAL GUARANTEE PERIOD: [3 YEARS]

GUARANTEED MINIMUM INTEREST RATES:

The guaranteed minimum interest rates for this contract as of the Certificate Date are:
Contract Year[s] 1-[3]: [3.15%]
[Contract Years [4]-[5]: [3.00%]]
Contract Years 6 and higher: [1.25%]

SURRENDER AND WITHDRAWAL PROVISIONS

This certificate provides certain limits on partial withdrawals. See section 6.2. This contract also provides for withdrawal charges in some instances if the owner surrenders the contract or takes partial withdrawals before a specified date.

There are no withdrawal charges for any withdrawal or surrender that:

- (a) is not more than ten percent (10%) of the cash value at that time less the sum of previous withdrawals during the current contract year; or
- (b) is applied to a payout plan C or D under section 8.2; or
- (c) occurs after the fifth (5th) contract year.

There are withdrawal charges for each other partial withdrawal or surrender. Each withdrawal charge is a percentage of the amount withdrawn. The following is the schedule of withdrawal charges:

Contract Year	1	2	3	4	5	6+
Withdrawal Charge	8%	7%	6%	4%	2%	0%

DIVIDENDS are not guaranteed. We do not expect that any dividend will be paid for this contract since it is not expected to contribute to divisible surplus

BENEFICIARY As stated in the application unless subsequently changed as provided in this contract.

The effective date and issue age of each benefit is the certificate date and issue age provided in the certificate, unless otherwise specified.

Any paid-up annuity, cash surrender values or death benefits that may be available under the contract are not less than the minimum benefits required by the NAIC Standard Nonforfeiture Law for Individual Deferred Annuities, model # 805.

The telephone number of the AR Department of Insurance is 501-371-2600

SECTION 2. DEFINITIONS

YOU and **YOUR** refer to the owner of this annuity contract. The owner is as shown in Section 1, unless later changed as provided in this certificate. The owner may be someone other than the annuitant.

WE, US and **OUR** means [Catholic Knights], a fraternal benefit society.

The **BENEFICIARY** is the person who has a right to receive the death benefit proceeds.

The **CERTIFICATE DATE** is the date this contract goes into effect. It is shown in Section I.

The **CONTRACT** is this certificate, together with the application and any riders. Our Amended and Restated Articles of Incorporation and Bylaws also are part of the contract.

CONTRACT YEARS and **MONTHS** are measured from the certificate date shown in Section 1. For example, if the certificate date is September 1, 2010, the first year ends August 31, 2011.

IN FORCE means this contract is in effect.

INITIAL FIXED INTEREST RATE is the rate of interest guaranteed for the Initial Guarantee Period.

INITIAL GUARANTEE PERIOD is the period of years during which the Initial Fixed Interest Rate applies. The Initial Guarantee Period begins on the Certificate Date. During the Initial Guarantee Period we will not change the current interest rate.

A **RIDER** is an attachment to the contract. It provides additional benefits.

TERMINATE means this contract is no longer in effect.

WRITTEN NOTICE means information received at our Home Office. Such information must be written, signed by you, and acceptable to us.

To make this certificate clear and easy to read, we have left out many cross references and conditional statements. Therefore, the provisions of the certificate must be read as a whole.

SECTION 3 PARTIES

3.1 The Owner

The initial owner is named on page 3. There may be subsequent owners. In this contract, “owner” refers to the then-current owner. Before the maturity date, the owner has surrender rights, the right to receive the annuity proceeds at the maturity date, and other rights as specified below. The owner’s death before the annuitant’s death and before the maturity date causes payment of the death benefit.

3.2 The Annuitant

The annuitant is named on page 3. The annuitant is the measuring life that determines the payments of the annuity proceeds at the maturity date. The annuitant’s death before the owner’s death and before the maturity date causes payment of the death benefit.

3.3 The Beneficiary

The initial beneficiary is named in the application. The owner may change beneficiaries. In this contract, “beneficiary” refers to the then-current beneficiary. If the owner or the annuitant dies before the maturity date, the death benefit is paid to the beneficiary.

If a beneficiary is an entity that is ignored pursuant to IRC section 72(u) or the corresponding provision of any future U.S. tax law, the entity will be deemed to be a natural person for purposes of section 7.1(c)(3) and 8.1. The deemed natural person will be the individual for whom the entity is deemed to be acting as an agent.

SECTION 4 BENEFITS

4.1 Annuity Proceeds

The annuity proceeds are the total of:
the guaranteed value; plus
any Excess interest; minus
a withdrawal charge, if any.

4.2 Payment of the Annuity Proceeds

The annuity proceeds will be paid to, or applied to a settlement option for;

1. The owner upon cash surrender of this contract; or
2. One or more designated beneficiaries at the death of the owner or the annuitant before the maturity date; or
3. The owner at the maturity date,

whichever of these events occurs first. Upon such payment or application of the full annuity proceeds, this contract will terminate. There are no withdrawal charges for payments at the death of the owner or the annuitant.

SECTION 5 PAYMENT AT THE MATURITY DATE

5.1 Maturity Date

This initial maturity date is stated on page 3. Before a maturity date then in effect, the owner may extend the maturity date to any date permitted by our maturity-date rules then in effect.

To change the maturity date, the owner must comply with the procedures specified by those rules. These procedures may include a rule that deems the owner to have accepted an extended maturity date that we propose if the owner does not timely notify us of non-acceptance. Hereinafter, “maturity date” refers to the then-current maturity date.

5.2 Payments

The annuity proceeds become payable to the owner on the maturity date if at that time the annuitant is alive and this contract is in force. The payments will be made pursuant to the owner’s election of a lump sum or a payout plan.

If the owner does not make an election, we will pay the annuity proceeds as a life annuity with a period certain of ten years unless otherwise provided under the Internal Revenue Code. If the owner elects a payout plan based on a life, we will use the annuitant's life to determine the amount, duration and other terms of the plan.

SECTION 6 SURRENDER AND WITHDRAWAL PROVISIONS

6.1 Full Cash Surrender

The owner may surrender this contract at any time before the maturity date while the annuitant is alive. The surrender will be effective when we receive a satisfactory written surrender request at our home office.

Except as provided in the next paragraph, upon surrender, we will pay the owner the annuity proceeds as reduced by any withdrawal charges. The owner may apply all or part of the annuity proceeds to a payout plan under section 8. The contract will terminate on the date of surrender.

We may defer the payment of the proceeds for not more than six (6) months. If the deferral exceeds thirty-one (31) days, we will pay interest at the rate of three percent (3%) per annum for the deferral period.

6.2 Partial Cash Withdrawal

The owner may make withdrawals under the following rules:

- a) Only accumulated interest may be withdrawn during the first year.
- b) Each withdrawal must be at least \$100.
- c) The owner may make up to twelve (12) scheduled, electronic withdrawals per year and up to four (4) non-scheduled withdrawals per year.

6.3 Withdrawal Charges

There are no withdrawal charges for any withdrawal or surrender that:

- (a) is not more than
 - (1) ten percent (10%) of the cash value at that time less;
 - (2) the sum of previous withdrawals during the current contract year; or
- (b) is applied to a payout plan C or D under section 8.2; or
- (c) occurs after the fifth (5th) contract year.

There are withdrawal charges for each other partial withdrawal or surrender. Each withdrawal charge is a percentage of the amount withdrawn. The withdrawal charges are shown in a table on page 3. There are no withdrawal charges after the fifth (5th) contract year.

6.4 Minimum Annuity Proceeds

We have the right to terminate this contract on any contract anniversary if the Annuity Proceeds is less than \$1,000.

We will notify you 60 days prior to termination of the contract. Upon termination we will pay you the annuity proceeds. No withdrawal charges will apply.

SECTION 7 DEATH OF THE OWNER OR ANNUITANT BEFORE MATURITY DATE

7.1 The Owner's Death

This subsection 7.1 applies upon receipt of due proof of death of the owner before the maturity date if the owner is also the annuitant or the annuitant is still alive.

(a) If the owner's spouse survives and is the sole primary beneficiary, the spouse may elect to continue this contract in force as the owner and annuitant, unless the owner chose a mandatory method of payment in the beneficiary designation that does not allow the spouse to change it. This subsection 7.1(a) does not apply to the subsequent death of the surviving spouse.

(b) If the owner's spouse does not make that election and in all other cases is not covered by subsection (a), the annuity proceeds will be paid to the beneficiary in a way that conforms to the restrictions of subsection 7.1(c) and to any method of payment that the deceased owner mandated.

To the extent that the preceding sentence leaves choices available to the beneficiary, the beneficiary may choose to receive the annuity proceeds in a lump sum and/or under one or more of the payout plans.

(c) The restrictions to which subsections 7.1(b) and 7.2(b) refer are that the payments must be:

- 1) in a lump sum paid within five years after the decedent's death; or
- 2) under a payout plan A or C that specifies that full distribution must be made no later than five years after the decedent's death; or
- 3) under a payout plan C or D that specifies a payment period that begins within one year after the decedent's death and ends either at the beneficiary's death or at the end of a period not extending beyond the beneficiary's life expectancy; this option is available only if the beneficiary is a natural person.

7.2 The Annuitant's Death

This subsection applies upon the annuitant's death if the annuitant is not the owner and dies before the owner and before the maturity date. Upon the receipt of due proof of the annuitant's death:

(a) If the annuitant's spouse is the owner and sole first beneficiary, the owner may elect to continue this contract in force with the surviving spouse as the annuitant and owner.

(b) If the owner is not a natural person, the annuity proceeds will be paid to the beneficiary in a way that conforms to the restrictions of subsection 7.1(c)(1) or (2). To the extent that the preceding sentence leaves choices available to the beneficiary, the beneficiary may elect to receive the annuity proceeds in a lump sum and/or under one or more of the payout plans.

(c) If the owner does not elect under subsection 7.2(a) and subsection 7.2(b) does not apply, the annuity proceeds will be paid to the beneficiary. To the extent that the deceased owner did not mandate a form of payment, the beneficiary may elect a lump sum and/or one or more of the payout plans.

SECTION 8 PAYOUT PLANS

8.1 Payout Plan Rules

The measuring life will be the annuitant, the owner, or the beneficiary for payments made pursuant to sections 5.2, 6.1, and 7 respectively.

All elections of payout plans must be made in accordance with our procedures and will take effect when we record them. When a payout plan starts, we will issue a contract that will contain the plan's terms. If the payee is not a natural person, the choice of a payout plan will be subject to our approval.

A payee who receives a contract providing for payments for life but with a selected guarantee period pursuant to plan C or E may from time-to-time designate one or more payout plan beneficiaries who would receive the guaranteed payment after the payee's death.

If the payee does not designate a payout plan beneficiary or if no payout plan beneficiary survives the payee, any amount payable upon the payee's death will be paid to the payee's estate.

8.2 Payout Plans

The payout plans are:

- A. Interest Deposit Account**— The allocated proceeds will earn interest annually at rates that we determine from time to time, but never less than one percent (1%). The interest may be paid periodically or left to accumulate. The payee may withdraw all or part of the account at any time.
- B. Payments For a Guaranteed Period**-- We will periodically pay the amount that is calculated so that the allocated proceeds plus interest are fully paid over a guaranteed period that may be selected. The guaranteed period must be at least five years. We reserve the right to set a maximum limit. The payee may not withdraw any of the account at any time.

C. Payments Based on a Single Life

1. **Life** --We will periodically pay the amount that is calculated so that the allocated proceeds plus interest would be fully paid over the payee's life expectancy. We will make no further payments after the payee's death. The payee may not withdraw any of the account at any time.

2. **Life with Period Certain** --We will periodically pay the amount that is calculated so that the allocated proceeds plus interest would be fully paid over a period based on the payee's life expectancy and the probability that the payee would not survive a certain period that may be selected. The period certain must be either ten or twenty years.

If the payee dies during the certain period, we will pay the present value of the remaining certain-period payments to the payout plan beneficiary pursuant to his or her election of a lump sum or an eligible payout pay out plan. To be eligible, the pay out plan must pay out at least as rapidly as the plan in effect when the payee died.

If the payout plan beneficiary does not make such an election, we will pay the annuity proceeds in a lump sum. If the payee survives beyond the selected period, we will continue making the periodic payments until the payee's death.

- D. Joint and Survivor Lifetime Payments** ---We will periodically pay the amount that is calculated so that the allocated proceeds plus interest would be fully paid over a period based on the life expectancies of two payees. We will pay that amount as long as one or both payees are living.

- E. Other Plans**--Other periodic plans may be arranged with us.

F. Minimum Payment Guarantee

1. The amount of the periodic payment under paragraphs B through E will be determined by a single interest rate that we will declare when the plan takes effect and which will be at least one and one half percent (1.5%). Payments that depend on one or more lives will also be determined by a mortality table that we will declare when the plan takes effect and which will be at least as favorable to the beneficiary as the Annuity 2000 Mortality tables, split by sex.

2. Tables 1, 2 and 3 show the minimum guaranteed payments for each plan under paragraphs B, C and D respectively under certain stated assumptions.

8.3 Frequency of Payments

Monthly, quarterly, semi-annual or annual payments may be selected.

8.4 Payout Plan Guaranteed Payments

The monthly amounts shown are for each \$1,000 applied. To change monthly payments to quarterly, semiannual or annual payments, multiply the monthly amount by 3.00; 6.02; or 12.08, respectively. The tables assume that no withdrawals are made; only the guaranteed interest of one and one-half percent (1.5%) is paid, and payments are made at the end of the payment mode selected.

Tables 2 and 3 are based on the Annuity 2000 Mortality tables, split by sex.

TABLE 1 PAYOUT PLAN B: PAYMENTS FOR A GUARANTEED PERIOD							
Years Selected	Monthly Amounts	Years Selected	Monthly Amounts	Years Selected	Monthly Amounts	Years Selected	Monthly Amounts
5	17.31	9	9.90	13	7.05	17	5.55
6	14.53	10	8.97	14	6.60	18	5.28
7	12.54	11	8.22	15	6.20	19	5.04
8	11.06	12	7.59	16	5.86	20	4.82

TABLE 2 PAYOUT PLANS C: PAYMENTS FOR LIFE						
Payee's Age	No Certain Period		Certain Periods			
			10 Year		20 Year	
	Male	Female	Male	Female	Male	Female
50	3.26	3.01	3.23	3.00	3.15	2.96
55	3.65	3.35	3.61	3.33	3.46	3.25
60	4.17	3.79	4.09	3.75	3.80	3.59
65	4.88	4.39	4.71	4.30	4.15	3.97
70	5.86	5.22	5.47	5.02	4.45	4.34

TABLE 3 PAYOUT PLAN D: JOINT AND SURVIVOR LIFETIME ANNUITY PAYMENTS					
Male Age	Female Age				
	50	55	60	65	70
50	2.72	2.86	2.97	3.06	3.13
55	2.81	2.99	3.16	3.31	3.42
60	2.88	3.10	3.33	3.55	3.75
65	2.93	3.19	3.48	3.79	4.09
70	2.96	3.25	3.59	3.99	4.41

The annuity benefits at the time of their commencement will not be less than those that would be provided by the application of the cash surrender value to purchase a single premium immediate annuity contract at purchase rates offered by us at the time to the same class of annuitants.

SECTION 9 OWNERSHIP

9.1 The Owner

The owner may exercise all contractual rights during the lifetime of the annuitant, without the consent of any beneficiary unless the beneficiary has been made irrevocable. The owner's rights expire at the maturity date, except for the right under section 5.2 to elect a payout plan.

9.2 Transfer of Ownership

Prior to the maturity date, the owner may transfer the ownership of this contract by a written assignment that is satisfactory to us and received at our home office. Such a transfer is then effective when the owner signs the assignment.

9.3 Collateral Assignment

Prior to the maturity date, the owner may assign this contract as collateral security by a written assignment that is satisfactory to us. We assume no responsibility for the validity or effect of any collateral assignment of this contract. We will not be responsible to an assignee for any payment or other action that we take before we receive the assignment at our home office.

An assignment of this contract as collateral for a loan will modify a prior choice of payout plan. The amount due the assignee will be payable in one sum, and the balance will be applied under the payout plan. Payout plans may not be assigned for the benefit of creditors.

The rights of a beneficiary under this contract are subordinate to those of an assignee, unless the beneficiary was effectively designated as an irrevocable beneficiary prior to the assignment.

9.4 Successor Owner

The contract owner may designate a successor owner to assume the responsibilities and duties of the contract owner in the event of the death of the owner. The successor owner may be an individual, at least 18 years of age, or a corporation, partnership, trust or other entity. The successor owner has no rights in regard to the contract and cannot direct any changes, conversion, transfers or cancellations, except in the event of the death of the contract owner. The contract owner may change the designation of the successor owner at any time.

SECTION 10 BENEFICIARY

10.1 Designated Beneficiary

The owner may designate one or more beneficiaries to receive the annuity proceeds upon the death of the owner or the annuitant before the maturity date ("the applicable death"). A designation may include one or more contingent beneficiaries who become the beneficiaries if all the primary beneficiaries die before the applicable death. If more than one beneficiary in the applicable class (primary or contingent) is alive at the applicable death, we will pay them in equal shares unless the owner has specified otherwise. If no designated beneficiary is alive at the applicable death, we will pay the owner if then living or, if not, the owner's estate.

10.2 Change of Beneficiary

While the annuitant is alive, the owner may change any beneficiary by signing a written notice and sending it to us. A beneficiary cannot be changed without the consent of any irrevocable beneficiary. No change is binding on us until it is recorded at our home office. Once recorded, the change binds us as of the date the owner signed it. The change will not apply to any payment we made before we recorded the owner's request. We may require that you send us this certificate to make the change.

SECTION 11 PREMIUM

11.1 Single Premium Payment

The single premium must be paid to us at our home office on or before delivery of this contract and during the lifetime of the annuitant.

SECTION 12 GUARANTEED VALUE AND EXCESS INTEREST

12.1 Guaranteed Value

The guaranteed value of this contract is the accumulation of the single premium, offset by withdrawals, at the Guaranteed Minimum Interest Rates listed on Page 3. Interest begins to accumulate on the premium when the home office receives it. Guaranteed values at any time during a contract year will be determined with allowance for the part of the year that has elapsed.

12.2 Excess Interest

In addition to the guaranteed values, we may pay or credit excess interest from time to time at an interest rate specified by us.

SECTION 13 DIVIDENDS

13.1 Dividends

Each year we determine our divisible surplus. We will credit this contract's share, if any, on the contract anniversary. Since we do not expect this contract to contribute to divisible surplus, we do not expect to credit any dividends to it. If a dividend is credited, the owner can choose between receiving it in cash or applying it to the annuity proceeds. If an option is not selected, the automatic option will be to apply the dividend to the annuity proceeds.

SECTION 14 GENERAL PROVISIONS

14.1 The Contract

This contract is issued in consideration of:

- a. your application;
- b. the payment of the single premium; and
- c. the contract and rider provisions.

The entire contract consists of:

- a. this certificate;
- b. any additional benefits provided by rider;
- c. the attached application;
- d. any required medical examination or declaration of insurability; and
- e. our Amended and Restated Articles of Incorporation and Bylaws, as amended from time to time.

No change in our Articles of Incorporation or Bylaws as amended made after the contract date shall reduce or change the benefits promised in this contract. You may continue this contract in force even if membership in the [Catholic Knights] is terminated except for within the contestable period for material misrepresentation in the application. No provision in the Articles or Bylaws provides for the determination of coverage under this contract.

All statements made by the applicant for issuance, reinstatement or renewal of this contract shall, in the absence of fraud, be deemed representations and not warranties. We will not use any statement, unless made in the application, to void this contract or to deny a claim.

No agent or person other than the President or Secretary has the authority to change or modify this contract or waive any of its provisions.

Any paid-up annuity, cash surrender or death benefits that may be available under this contract are not less than the minimum benefits required by any statute of the state in which the contract is delivered.

14.2 Incontestability

We will not contest this contract after it has been in force for two years from the contract date.

14.3 Misstatement of Age or Sex

If the annuitant's age or sex is not correctly shown in the application, we will adjust the income payable. The annuity income on the maturity date will be based on the annuitant's correct age and sex at that time.

14.4 Maintenance of Legal Reserves

The reserves held on your contract are computed according to the standards prescribed by law. If, for any reason at any time, we do not have sufficient assets to cover the reserves, the Board of Directors may require

that the amount of such deficiency shall be equitably apportioned to all outstanding contracts. The amount thus apportioned to your contract shall either:

- a. be paid in cash by you; or
- b. be an indebtedness against your contract at an 8% rate of interest per annum; or
- c. proportionately reduce benefits under the contract.

The Board of Directors may specify the manner of election and which alternative is to be presumed if no election is made.

14.5 Effective Date of Changes

Any election or request for a change provided in this contract must be received, approved and recorded at the home office before it is effective. Once received, approved and recorded, it is effective as of the date it was signed or the date it was received at the home office if no signing date appears on it.

14.6 Amendment of Contract

We reserve the right to amend this contract at any time without the owner's consent if we determine that the amendment is necessary to preserve the contract's status as an annuity for tax purposes.

14.7 Conformity

This contract was approved under the authority of the Interstate Insurance Product Regulation Commission and issued under the Commission standards. Any provision of the contract that on the provisions' effective date is in conflict with Interstate Insurance Product Regulation Commission standards for this product type is hereby amended to conform to the Interstate Insurance Product Regulation Commission Standards for this product type as of the provision's effective date.

14.8 Forms and Procedures

We may require the owner to follow our procedures and to use our forms to take any action, such as changing a beneficiary or requesting a payment. We may require the owner to submit this certificate for endorsement to show any change. The owner may obtain any information and forms from an authorized agent or the home office.

14.9 Report

The owner of the contract will receive an annual free report on the status of the contract. The owner may request additional status reports throughout the year and we reserve the right to charge \$10 for each additional report.

The report shall contain:

- a. the beginning and end dates of the current report period
- b. the account value at the beginning and end of the current report period
- c. amounts that have been credited or debited to the contract during the report period
- d. cash surrender value at the end of the report period.

SINGLE PREMIUM DEFERRED ANNUITY
Guaranteed Cash Values
Guaranteed Annuity
Participating



[Catholic Knights]
1100 West Wells Street
Milwaukee Wisconsin 53233
800-927-2547
[www.catholicknights.org]

[CATHOLIC KNIGHTS]
ACCESS ANNUITY RIDER

This Rider shall become a part of the Contract to which it is attached. The Rider provisions apply in lieu of any Contract provisions to the contrary. The effective date of this Rider is shown on the Specifications Page of the Contract.

Surrender charges that otherwise apply will be waived when:

1. The owner and the annuitant are the same person, and after the issue date:
 - a. The owner is age 64 or younger and becomes totally disabled for at least three (3) months. This means, due to injury or disease, not being able to perform the essential duties of the owner's occupation. Or;
 - b. The owner, spouse or dependent child enrolls full-time in post-high school studies. Charges will be waived on only \$25,000 under this section. Or;
 - c. The owner meets the definition for receiving qualified long-term care services under Internal Revenue Code section 7702B. Or;
 - d. The owner or spouse is diagnosed by a doctor with a terminal illness with less than 12 months to live.

The owner and annuitant are shown on the Specifications Page. A person must apply for this waiver while still undergoing one of the above circumstances. We will provide you a claim form within ten (10) working days of your request. If we do not, we will consider that you complied with the claim requirements if you provide written proof covering the occurrence. Any approved withdrawal will be subject to our usual rules regarding minimums, frequency of payments, and remaining balances.

Or;

2. After the contract has been in force for more than one (1) year the owner applies the values to a non-life guaranteed period option. The minimum interest rate credited will be an annual effective interest rate of 1½%.
Or;
3. In the final year of surrender charges the contract is exchanged for a new [Catholic Knights] annuity.

If we deny an application for waiver under this Rider we will not process the withdrawal until you are notified of the denial and accept the surrender charges.

This Rider will terminate upon your written request or the termination of the contract. This will not affect the waiver of any surrender charge while this Rider was in force.

Signed at our Home Office in Milwaukee, Wisconsin on the Certificate Date.



William R. O'Toole
President



Allan G. Lorge
Secretary

<i>SERFF Tracking Number:</i>	<i>CAKN-126697873</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Catholic Knights</i>	<i>State Tracking Number:</i>	<i>46086</i>
<i>Company Tracking Number:</i>	<i>16-610</i>		
<i>TOI:</i>	<i>A02I Individual Annuities- Deferred Non-Variable</i>	<i>Sub-TOI:</i>	<i>A02I.003 Single Premium</i>
<i>Product Name:</i>	<i>SPDA-5</i>		
<i>Project Name/Number:</i>	<i>CNO-16 (ss)/16-610</i>		

Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item:	Flesch Certification	
Comments:		
Attachment:		
Flesch Cert AR.pdf		

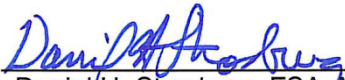
	Item Status:	Status Date:
Satisfied - Item:	Application	
Comments:		
This application was filed in your state with our Flexible Premium Deferred Annuity June 23, 2010 SERFF filing no: CAKN-126676715		
Attachment:		
Anty app fnl fld vrsn 6-22.pdf		

**STATE OF ARKANSAS
READABILITY CERTIFICATION**

COMPANY NAME: Catholic Knights

This is to certify that the forms referenced below has achieved a Flesch Reading Ease Score as indicated below and complies with the requirements of Ark. Stat. Ann. Section 66-3251 through 66-3258, cited as the Life and Disability Insurance Policy Language Simplification Act.

Form Number	Score
2010 SPDA 5 AR	50.4
2010 ANTY RDR	53.5



Daniel H. Strasburg, FSA, MAAA
Vice President and Chief Actuary
June 28, 2010



Application for Membership and Annuity to:

[Catholic Knights]
1100 West Wells Street
Milwaukee, Wisconsin 53233
(800) 927-2547

(Please Print)

A. INFORMATION REGARDING ANNUITANT (Person on whose Life Annuity is desired)

1. Sex: ☐ Female ☐ Male ☐ New Member
 2. DOB: Month _____ Day _____ Year _____ Age _____
 3. Social Security/ITIN No: _____ Driver License No. _____
 4. Annuitant's Name: _____
 First _____ Middle Initial _____ Last _____
 5. Annuitant's Address: _____
 Street _____ City _____ State _____ Zip _____
 Phone (home) _____ Phone (work) _____ Email _____
 6. Are you a US Citizen, or do you have permanent residence status?
☐ Yes – Proof of Identity _____
☐ No – If not a U.S. citizen, provide 1-151 (green card) number _____ Type of Visa _____
 7. Employer's (Full name, address and phone number): _____
 8. Is the annuitant Catholic? ☐ Yes ☐ No (If no, do you otherwise qualify for membership?)
 Explain: _____
 9. Joint Annuitant (for SPIA Joint and Survivor plans only)
 Name: _____ Relationship to Annuitant: _____
 Social Security/ITIN No: _____ DOB: _____

B. OWNER (Must complete section if Owner is not Annuitant)

The owner will be:
 Name: _____ Relationship to Annuitant: _____
 First _____ Middle Initial _____ Last _____
 Social Security/ITIN/TAX No: _____ DOB: _____
 Address of Owner: _____
 Street _____ City _____ State _____ Zip _____
 Phone (home) _____ Phone (work) _____ Email _____

C. PAYOR (If payor is other than the annuitant or owner complete)

Name: _____ Relationship: _____
 First _____ Middle Initial _____ Last _____
 Address: _____
 Street _____ City _____ State _____ Zip _____
 Phone (home) _____ Phone (work) _____ Email _____
 Social Security/ITIN/Tax ID No.: _____ DOB: _____

D. BENEFICIARY (Do not complete for SPIA Single Life plan. Use Remarks for additional names.)

Primary: Full Name	Relationship	Social Security/Tax ID No
_____	_____	_____
_____	_____	_____
Contingent: Full Name	Relationship	Social Security/Tax ID No
_____	_____	_____
_____	_____	_____

Unless otherwise directed, the annuity proceeds shall be divided equally among all persons who are named as primary beneficiary and who survive the owner or annuitant. If no primary beneficiaries survive, the proceeds shall be divided equally among all persons who are named as contingent beneficiary and who survive the owner or annuitant as applicable.

E. TYPE OF CONTRACT1. ☐ **SINGLE PREMIUM DEFERRED ANNUITY**☐ **FLEXIBLE PREMIUM DEFERRED ANNUITY**

Contract Plan: _____

2. SINGLE PREMIUM IMMEDIATE ANNUITY:☐ Single Life ☐ Single Life w/ Period Certain _____ Yrs☐ Joint Life with 100% Survivor☐ Joint Life with 100% Survivor and 10 yr Period Certain☐ Joint Life with 50% Survivor☐ Period Certain _____ Yrs**3. FOR ALL PLANS – Check one of the following:**☐ Non-Qualified☐ IRA (Tax Year _____)☐ ROTH IRA (Tax Year _____)☐ SEP (Simplified Employee Pension)**F. PREMIUM PAYMENT and PAYOUT INFORMATION****1. DEFERRED:**☐ Single Premium Plan paid \$ _____☐ Flexible Premium: Amount Submitted with application \$ _____ Amount billed \$ _____Premium Frequency (*Check one*) ☐ Ann ☐ Semi ☐ Qtly ☐ EFT _____ (day) ☐ Do not bill**2. IMMEDIATE:** Premium Paid \$ _____**a. PAYMENT PATTERN (*Available on Single Life; Single life with 10, 15, or 20 years certain; or Joint and Survivor without period certain*):**☐ Level☐ Increasing Payments☐ 3% annual increase☐ 5% annual increase**b. PAYMENT METHOD:** ☐ EFT ☐ Check ☐ Apply Payments to contract No. _____**c. COMPLETE IF PLAN ELECTED HAS A GUARANTEED PERIOD CERTAIN:**Do you wish to irrevocably waive the future right to a partial surrender of the commuted value of any remaining Period Certain payments ☐ Yes ☐ No**d. Elective Withholding: (*Complete for Single Premium Immediate Annuities*)**

_____ I wish to have _____% Federal Income Tax withheld from the taxable portion of each payment.

_____ I do not wish to have Federal Income Tax withheld.*(If withholding applies and an election is not made, we will withhold 10% Federal Income tax from each payment)***e. PAYMENT MODE: (*all plans*)** ☐ Annual ☐ Semi ☐ Qtly ☐ MO**3. EFT (*all plans*) submit authorization card and void check or deposit slip****G. SOURCE OF TRANSFER/ROLLOVER**☐ Traditional IRA to Traditional IRA☐ Qualified Retirement Plan (401K) to☐ Traditional or ☐ Roth IRA☐ 403(b) to Traditional IRA☐ From SIMPLE IRA to Roth IRA☐ From Traditional IRA to ROTH IRA☐ From ROTH IRA to ROTH IRA☐ 1035 Exchange (non-qualified) Approx Amount \$ _____

Source of Funds _____

*(note 2-year-holding period during which a SIMPLE IRA can only be rolled over into another SIMPLE IRA)***H. REPLACEMENT QUESTIONS**Do you have existing life insurance or annuity contracts with us or any other company? ☐ YES ☐ NOIs this annuity intended to replace or change any life insurance or annuity contract in force with us or any other company? ☐ YES ☐ NO*(If yes, submit the required replacement forms)***READ CAREFULLY BEFORE SIGNING****AUTHORIZATION TO OBTAIN INFORMATION AND ACKNOWLEDGEMENT STATEMENT**

I AUTHORIZE any consumer reporting agency, employer or government agency having any non-medical information of me to give to [Catholic Knights] any and all such information. To facilitate the rapid submission of such information, I authorize all said sources, to give such records or knowledge to any agency employed by [Catholic Knights] to collect and transmit such information. I understand the information obtained by use of this Authorization will be used by [Catholic Knights] to determine eligibility for insurance. to any person or organization EXCEPT to reinsuring companies.

I KNOW that I may request a copy of this Authorization.

I AGREE THAT A PHOTOGRAPHIC COPY OF THIS Authorization shall be as valid as the original.

I ACKNOWLEDGE receipt of the Notice to Applicant.

I AGREE this Authorization shall be valid for two years from the date shown below.

I, the undersigned, hereby apply to [Catholic Knights] for membership, insurance, or annuity in the amount, on the plan, and at the rate as stated; further,

I, hereby agree that this application and this statement of insurability (when used in lieu of a medical examination) and the contract applied for, together with the Articles of Incorporation, By-Laws, Rules and Regulations, and any amendments thereto previously adopted, or which may hereafter be adopted, shall constitute the entire contract between the parties hereto; further,

IT IS AGREED:

- 1) All statements in this application, which includes pages 1-3 are, to the best of my knowledge and belief, complete and true;
- 2) No information acquired by any agent shall bind the Society unless set out in writing in this application;
- 3) No agent can accept risks or modify contracts, or waive any rights or requirements of the Society;
- 4) Unless otherwise provided in a conditional receipt bearing the date of the application, no liability exists until a contract is delivered to, and accepted by the owner and the first payment is paid during the lifetime and insurability of the person proposed for coverage under this contract;
- 5) If proof of age is not given with this application, the Annuitant will furnish the Society with such proof before annuity payments begin;
- 6) The contract applied for shall take effect on the later of;
 - (a) the date requested by the applicant, if such request is made, or:
 - (b) the date the application is approved by the Society at its Home Office;
- 7) The acceptance of any contract issued on this application shall constitute acceptance and ratification of any corrections, additions or changes made by the Society, except that no change will be made in the plan of annuity or payment without written ratification of the applicant.

Any person who knowingly presents a false statement in an application for insurance may be guilty of a criminal offense and subject to penalties under state law.

Date and signed at (City) _____ (State) _____ on: Mo ____ Day ____ Year ____

Signature of Annuitant

Signature of Licensed Agent

Agent No./%

Signature of Owner if other than Annuitant

Signature of Licensed Agent

Agent No./%

[illegible]

2010 ANTY APP

[CATHOLIC KNIGHTS]
1100 West Wells Street Milwaukee, WI 53233

CONDITIONAL RECEIPT – Void if altered or modified, or if check or draft given in payment is not honored.

Received \$ _____ from _____ for an annuity to take effect on the date that this payment is received at the Home Office.

(check one)

☐ Flexible Premium Deferred Annuity ☐ Single Premium Deferred Annuity ☐ Single Premium Immediate Annuity

Month _____ Day _____ Year _____

Agent's Signature

Number20

2010 ANTY APP